

P04000023809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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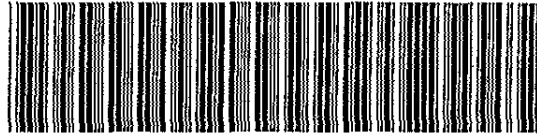
(Business Entity Name)

(Document Number)

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04 JAN 29 PM 7:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: GLPM Laboratory AND Flamework Design, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Glenda L Moore
Name (Printed or typed)

431 Archaic Dr. Box 89
Address

Winter Haven, Florida 33880
City, State & Zip

863-291-0348
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GLPM Laboratory AND Framework Design, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*431 ARCHAIC DR. BOX 89
WINTER HAVEN, FLORIDA 33880*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*INDUSTRIAL CHEMICAL LABORATORY designs, SET-UP, AND TRAINING
FLAME WORK designs, TRAINING, AND GLASS FLAME WORK products.*

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*Glenda L. Moore - P
431 ARCHAIC Dr. BOX 89
WINTER HAVEN, FLORIDA 33880*

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

*Glenda L. Moore
431 ARCHAIC Dr. BOX 89
WINTER HAVEN, FLORIDA 33880*

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

*Glenda L. Moore
431 ARCHAIC Dr. BOX 89
WINTER HAVEN, FLORIDA 33880*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Glenda L. Moore

Signature/Registered Agent

1/26/04

Date

Glenda L. Moore

Signature/Incorporator

1/26/04

Date